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FILED  
Aug 01 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G67232 (0)  
1. Corporation Name  
ANNUITY INTERNATIONAL MARKETING CORPORATION



Principal Place of Business  
7251 W PALMETTO PARK RD.  
BOCA RATON FL 33433

Mailing Address  
7251 W PALMETTO PARK RD.  
BOCA RATON FL 33433-3442

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

11/01/1983

3a. Date of Last Report

05/01/1996

4. FEI Number

22-2490049

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD  
NAME CROHN, FRANK T.  
STREET ADDRESS 6001 OLD CLINT MOORE RD  
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

TITLE VT  
NAME HOEFT, JERALD D.  
STREET ADDRESS 18874 ANCHOR DRIVE  
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

TITLE PD  
NAME RUBERTONE, DONNA J  
STREET ADDRESS 3725 KINGS WAY  
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

TITLE V  
NAME HAVENER, SHARON JS  
STREET ADDRESS 7941 MCLAURIN ROAD NORTH  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE D  
NAME HETZ, MARK V  
STREET ADDRESS 415 SW 8TH STREET  
CITY-ST-ZIP TOPEKA KS

☐ DELETE

TITLE S  
NAME TICE, JULIE B  
STREET ADDRESS 710 NE 69TH STREET  
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

HOEFT, JERALD R.

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

JERALD R. HOEFT

JERALD R. HOEFT

01/01/97 (11) 391 016

CR2E034 (9/96)